



CANDICE S. MILLER, Secretary of State
MICHIGAN DEPARTMENT OF STATE
LANSING, MICHIGAN 48918-0001

**SALVAGE VEHICLE AGENT
EMPLOYMENT CERTIFICATION**

I certify that _____
(Agent's Name - Printed)

driver license or personal identification number _____

is a bona fide employee of:

(Name of Dealership)

(Dealer License Number)

and that the dealer takes responsibility for this employee's actions in the course of employment.

Should the employment be terminated, the dealership agrees to surrender the photo identification card and notify the Michigan Department of State, Bureau of Automotive Regulation, Licensing Section **within five days**.

(Signature of Licensee)

(Title)

(Printed Name)

(Date)